Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's ase or passport). g your picture tification to your sting with the trustee.	Kimberly First name L Middle name Carroll Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-6461	

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 2 of 53

Case number (if known)

Debtor 1 Kimberly L Carroll

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2503 Clifton Avenue Rockford, IL 61102 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Winnebago County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 3 of 53

Case number (if known) Debtor 1 Kimberly L Carroll

Par	Tell the Court About	our B	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ C	hapter 7						
		□с	hapter 11						
		□с	hapter 12						
		□с	hapter 13						
8.	How you will pay the fee		about how yo	u may pay. Typi attorney is subn	ically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
					rallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals to Pay			
						n only if you are filing for Chapter 7. By law, a judge may,			
						ur income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out			
			the Application	n to Have the C	Chapter 7 Filing Fee Waived (Office	ial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No	D.						
	last 8 years?	□ Ye	es.						
			District	-	When	Case number			
			District		When	Case number			
			District		When	Case number			
10	Are any bankruptcy								
10.	cases pending or being filed by a spouse who is	■ No							
	not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.						
	annate:		Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No	o. Go to I	ne 12.					
		□ Ye	es. Has yo	ur landlord obta	ined an eviction judgment agains	t you and do you want to stay in your residence?			
				No. Go to line	12.				
				Yes. Fill out <i>Ini</i> bankruptcy pet		Judgment Against You (Form 101A) and file it with this			

Document Page 4 of 53 Case number (if known) Debtor 1 Kimberly L Carroll Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure **Bankruptcy Code and are** you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No.

property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 5 of 53

Debtor 1 Kimberly L Carroll

ly L Carroll Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 6 of 53

Case number (if known) Debtor 1 Kimberly L Carroll Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kimberly L Carroll Signature of Debtor 2 Kimberly L Carroll Signature of Debtor 1 Executed on July 12, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 7 of 53

Debtor 1 Kimberly L Carroll Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David H. Carter	Date	July 12, 2016	
Signature of Attorney for Debtor		MM / DD / YYYY	
David II Cartar			
David H. Carter			
Printed name			
David H. Carter			
Firm name			
308 W. State St., Suite 215			
Rockford, IL 61101			
Number, Street, City, State & ZIP Code			
Contact phone 815/968-8900	Email address		
Bar number & State			
Dai Humber & State			

		DOGUM	eni Paue o oi os	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kimberly L Carro	II		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
۱.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	12,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,150.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	34,150.00
ar	t 2: Summarize Your Liabilities		
			abilities t you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	57,800.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	20,844.38
	Your total liabilities	\$	78,644.38
ar	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,813.17
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,772.00
aı	t 4: Answer These Questions for Administrative and Statistical Records		
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 9 of 53

Debtor 1 Kimberly L Carroll Page 9 of 53

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case	16-8166	7 Doc 1		07/12/16 ument	Entered (6 15:58	:56 De	sc M	lain
Fill	in this information	on to identify	your case and								
Deb		Kimberly L (dle Name		Last Name					
	otor 2 use, if filing) F	irst Name	Mide	dle Name		Last Name					
Unit	ted States Bankru	ptcy Court for	the: NORTHE	RN DIST	RICT OF ILLIN	IOIS					
Cas	se number										Check if this is an amended filing
_	ficial Form		_								12/15
n ea hink nfor	ch category, separ it fits best. Be as mation. If more spa ver every question.	ately list and d complete and ace is needed,	lescribe items. Lis accurate as possi	ble. If two sheet to ti	married people his form. On the	are filing togethe top of any additi	er, both are e ional pages,	qually resp	onsible for su	pplying	tegory where you
	No. Go to Part 2. Yes. Where is the		quitable interest in	any resid	ence, bunumg,	ianu, or sinniar p	roperty ?				
1.1	2503 Clifton A		scription	What _ □		i-unit building	у	the amoun	of any secure	d claims	exemptions. Put s on Schedule D: ured by Property.
	Rockford City	IL State	61102-0000 ZIP Code			or mobile home		Current va			ent value of the on you own? \$12,000.00
					Other	in the property?	Check one	(such as fo			nership interest y the entireties, or
	Winnebago County				At least one of	the debtors and a		(see in:	t if this is com structions) cal	ımunity	r property

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......

\$12,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	otor 1	Case 16-81667 Kimberly L Carroll	Doc 1	Filed 07/12/16 Document	Entered 07/12/2 Page 11 of 53	16 15:58:56	Desc Main
3 C	ars var	ns, trucks, tractors, spor	t utility vehi	cles motorcycles		, , , =	
	•	.c, uoc, uoc. e, epe.		,			
	l No						
	Yes						
		ahayay				Do not deduct secur	ed claims or exemptions. Put
3.1				Who has an interest in the	property? Check one	the amount of any se	ecured claims on Schedule D:
	Mode Year:	"		Debtor 1 only			Claims Secured by Property.
			known	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 o	nlv	Current value of the entire property?	e Current value of the portion you own?
		information:		☐ At least one of the debto	•		,
				Check if this is commu	nity property	\$3,500.0	90 \$3,500.00
ţ.	oages y	dollar value of the portion have attached for Paracribe Your Personal and H	rt 2. Write th	at number here			\$3,500.00
		n or have any legal or ed		rest in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	E <i>xample</i> ∃ No	old goods and furnishing es: Major appliances, furnit Describe		china, kitchenware			
			sary house appliances	hold goods and furni	shings, table chairs,	couch,	\$1,200.00
E	No				ment; computers, printers	s, scanners; music coll	lections; electronic devices
E		oles of value es: Antiques and figurines; other collections, mem			oks, pictures, or other art c	objects; stamp, coin, o	r baseball card collections;
		Describe					
E		ent for sports and hobbie es: Sports, photographic, e musical instruments		other hobby equipment; t	picycles, pool tables, golf o	clubs, skis; canoes an	d kayaks; carpentry tools;
		Describe					
_	Firearm Examp	i s <i>les:</i> Pistols, rifles, shotgun	s, ammunitio	n, and related equipment			
	☐ Yes.	Describe					

Document Page 12 of 53 Case number (if known) Debtor 1 Kimberly L Carroll 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$300.00 necessary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$50.00 misc. costume jewlery 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,550.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Cash \$100.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... checking account with US Bank \$1,000.00 17.1. \$0.00 savings account with US Bank-zero 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No Official Form 106A/B Schedule A/B: Property page 3

Case 16-81667

Doc 1

Filed 07/12/16

Entered 07/12/16 15:58:56

Desc Main

		Case 10-81007	DOC 1	Proumont		112/10 15.56.50	Desc Main
De	ebtor 1	Kimberly L Carroll		Document	Page 13 of 5	Case number (if known)	
	☐ Yes.	Give specific information a	about them ne of entity:			% of ownership:	
20.	Negot Non-n ■ No	nment and corporate bon iable instruments include p egotiable instruments are t Give specific information a Issu	ersonal checks hose you canr	s, cashiers' checks, pror	nissory notes, and r	money orders.	
21.	Exam _l □ No □	ment or pension account ples: Interests in IRA, ERIS	SA, Keogh, 401	I (k), 403(b), thrift saving	s accounts, or other	pension or profit-sharing p	plans
	■ Yes.	List each account separate Type of	ely. of account:	Institution n	ame:		
				401 K pla	n		\$10,000.00
22.	Your s Examp	ty deposits and prepaym share of all unused deposite oles: Agreements with land	s you have ma	rent, public utilities (elec			ies, or others
	■ No □ Yes.	ties (A contract for a period	e and descripti		life or for a number	of years)	
	26 U.S. ■ No □ Yes. ■ Trusts ■ No	ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a Institution n , equitable or future inter Give specific information a	and 529(b)(1). ame and desc	ription. Separately file th	e records of any int	erests.11 U.S.C. § 521(c):	
26.	Patent Exam _l ■ No	s, copyrights, trademarks ples: Internet domain name	s, trade secre es, websites, p			nents	
27.	Exam _l ■ No	ses, franchises, and other ples: Building permits, excluding permits, excluding permits, excluding the specific information and the	usive licenses,		n holdings, liquor lic	enses, professional license	es
M	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to you					
	■ No □ Yes.	Give specific information a	about them, inc	cluding whether you alrea	ady filed the returns	and the tax years	
29.	Exam _i ■ No	r support poles: Past due or lump sum Give specific information		usal support, child suppo	ort, maintenance, di	vorce settlement, property	settlement

Official Form 106A/B Schedule A/B: Property page 4

	Case 16-816	067 DOC 1	Filed 07/12/16		15:58:56 L	Desc Main
Debtor 1	Kimberly L Cari	roll	Document	Page 14 of 53 Case n	umber (if known)	
Exam _i ■ No		disability insurance p I loans you made to s		nefits, sick pay, vacation pay,	workers' compensa	ation, Social Security
	sts in insurance poli ples: Health, disability		ealth savings account	(HSA); credit, homeowner's, c	or renter's insurance	
□ No						
■ Yes.	Name the insurance	company of each po Company name:	licy and list its value.	Beneficiary:		Surrender or refund value:
		Rock Valley Cre	edit Union zero valu	ue		\$0.00
		employer provid	ded term policy zer	ro		\$0.00
If you somed No Yes. 33. Claims Exam No Yes. 34. Other No Yes.	are the beneficiary of one has died. Give specific informs against third partie ples: Accidents, employeescribe each claim	ation es, whether or not y oyment disputes, ins quidated claims of e	rou have filed a lawsu surance claims, or right	nsurance policy, or are curren	yment	
☐ Yes.	Give specific inform	ation				
			om Part 4, including a	ny entries for pages you ha	ve attached	\$11,100.00
Part 5: De	escribe Any Business-F	Related Property You (Own or Have an Interest	In. List any real estate in Part 1		
37. Do you	own or have any legal	or equitable interest in	n any business-related p	property?		
	o to Part 6.	•				
☐ Yes. (Go to line 38.					
	escribe Any Farm- and you own or have an inter			vn or Have an Interest In.		
46. Do yo	u own or have any le	egal or equitable int	erest in any farm- or	commercial fishing-related	property?	
	. Go to Part 7.					
☐ Yes	s. Go to line 47.					

Official Form 106A/B Schedule A/B: Property page 5

Describe All Property You Own or Have an Interest in That You Did Not List Above

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Page 15 of 53

Case number (if known) Document Debtor 1 Kimberly L Carroll 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ No Yes. Give specific information....... \$6,000.00 workers compensation suit 54. Add the dollar value of all of your entries from Part 7. Write that number here \$6,000.00

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$12,000.00 Part 2: Total vehicles, line 5 \$3,500.00 Part 3: Total personal and household items, line 15 57. \$1,550.00 Part 4: Total financial assets, line 36 \$11,100.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$6,000.00 Total personal property. Add lines 56 through 61... \$22,150.00 Copy personal property total \$22,150.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$34,150.00

Official Form 106A/B Schedule A/B: Property page 6

			HI T AUC. TO ULUS	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kimberly L Carro	II		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions	are vou claiming	? Check one only.	even if your spouse	is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$12,000.00		\$0.00	735 ILCS 5/12-901
		100% of fair market value, up to any applicable statutory limit	
\$3,500.00		\$500.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$1,200.00		\$1,200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$50.00		\$50.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$12,000.00 \$12,000.00 \$1,200.00	\$12,000.00	\$12,000.00 \$12,000.00 \$12,000.00 \$3,500.00 \$3,500.00 \$100% of fair market value, up to any applicable statutory limit \$1,200.00 \$100% of fair market value, up to any applicable statutory limit \$1,200.00 \$100% of fair market value, up to any applicable statutory limit \$1,000.00 \$100% of fair market value, up to any applicable statutory limit \$300.00 \$300.00 \$300.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$50.00 \$50.00 \$50.00

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 17 of 53

Case number (if known)

De	Killiberry L Carroll				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash Line from Schedule A/B: 16.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
	Ellie Holli Genedale 74 B. 1911			100% of fair market value, up to any applicable statutory limit	
	checking account with US Bank Line from Schedule A/B: 17.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
	Line Holli Scriedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
	401 K plan Line from Schedule A/B: 21.1	\$10,000.00		\$10,000.00	735 ILCS 5/12-1006
	Line Holli Scredule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
	workers compensation suit Line from Schedule A/B: 53.1	\$6,000.00		\$6,000.00	820 ILCS 305/21
	Line Holli Schedule A/B. 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	■ No				
	☐ Yes. Did you acquire the property cover	red by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

		Document	Page 18	3 of 53		
Fill in this inform	nation to identify you	ır case:				
Debtor 1	Kimberly L Carr	oll				
202101	First Name		Last Name		-	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	NOIS			
					-	
Case number					☐ Check	if this is an
,					_	ed filing
						3
Official Form	n 106D					
Schedule	D: Creditors	Who Have Claims S	ecure	d by Propert	У	12/15
Be as complete and	l accurate as possible.	If two married people are filing together	, both are eq	ually responsible for su	upplying correct information	tion. If more space
		out, number the entries, and attach it to				
• •	have claims secured by	vour property?				
	-	his form to the court with your other s	chodulos V	ou have nothing also t	to report on this form	
_		•	criedules. T	ou have nothing else t	o report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List Al	I Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the creditions in particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.		Do not deduct the	that supports this	portion
2.1 Chase Mo	rtaaaa	Describe the property that secures the	o claim:	value of collateral. \$54,800.00	claim \$12,000.00	If any \$42,800.00
2.1 Chase Mo Creditor's Name		2503 Clifton Ave. Rockford, IL		\$54,600.00	\$12,000.00	\$42,000.00
		Winnebago County	- 01102			
		As of the date you file, the claim is: Ch	anak all that			
P.O. Box 2		apply.	ieck all triat			
	s, OH 43224	☐ Contingent				
Number, Street,	City, State & Zip Code	Unliquidated				
Who owes the de	bt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only	ar eneck ener	☐ An agreement you made (such as mo	ortgage or sec	cured		
Debtor 2 only		car loan)	3.3.			
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
_	ne debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this cla		☐ Other (including a right to offset)				
community de	bt					
Date debt was incu	urred	Last 4 digits of account number	er			
	ey Credit Union	Describe the property that secures the		\$3,000.00	\$3,500.00	\$0.00
Creditor's Name	•	2006 chevy cobalt unknown r	niles			
1201 Cliffe	ord	As of the date you file, the claim is: Chapply.	neck all that			
Rockford,	IL 61101	☐ Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo	ortgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and De	ebtor 2 only ne debtors and another	☐ Statutory lien (such as tax lien, mech☐ Judgment lien from a lawsuit	anic's lien)			
☐ Check if this cla		_	utomobile	e loan		
community de		Other (including a right to offset)				

Date debt was incurred

Last 4 digits of account number

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 19 of 53

Debtor 1	Kimberly L	Carroll		Case number (if know)	
	First Name	Middle Name	Last Name		
Add the	dollar value of ye	our entries in Column A on t	this page. Write that number here:	\$57,800.0	0
	the last page of at number here:	your form, add the dollar va	lue totals from all pages.	\$57,800.0	0

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

O	430 10 01001 1	Document	Page 20 of 53	DCOO Man
Fill in this info	rmation to identify your			
Debtor 1	Kimberly L Carro	II		
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF ILI	INOIS	
Case number				
(if known)			Γ	☐ Check if this is an
				amended filing
Official For	m 106E/E			
		/ho Have Unsecured	Claims	12/15
			Y claims and Part 2 for creditors with NONPRIORITY	
Schedule D: Cred left. Attach the Co name and case no	itors Who Have Claims Secontinuation Page to this pagumber (if known).	rured by Property. If more space is ge. If you have no information to re	On not include any creditors with partially secured cl needed, copy the Part you need, fill it out, number th port in a Part, do not file that Part. On the top of any	ne entries in the boxes on the
	All of Your PRIORITY Un			
_ ′	tors have priority unsecure	d claims against you?		
No. Go to	Part 2.			
Yes.				
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any credi	tors have nonpriority unsec	cured claims against you?		
☐ No. You h	ave nothing to report in this p	eart. Submit this form to the court with	your other schedules.	
Yes.				
	ur nonnriority uncocured of	aims in the alphabetical arder of th	e creditor who holds each claim. If a creditor has mor	ra than and nannriarity
unsecured cla	aim, list the creditor separately	y for each claim. For each claim listed	I, identify what type of claim it is. Do not list claims alread nave more than three nonpriority unsecured claims fill or	dy included in Part 1. If more
				Total claim
4.1 Rockf	ord Health Physician	S Last 4 digits of acc	ount number	\$274.00
Nonprior	ity Creditor's Name			
	RTMENT 4701 Stream, IL 60122	When was the debt	incurred?	
	Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply	
Who inc	urred the debt? Check one.	·		
■ Debte	or 1 only	☐ Contingent		
☐ Debte	or 2 only	☐ Unliquidated		
☐ Debte	or 1 and Debtor 2 only	☐ Disputed		
☐ At lea	ast one of the debtors and and	other Type of NONPRIOR	RITY unsecured claim:	
☐ Chec	ck if this claim is for a comi	munity		
debt		Obligations arisin	ng out of a separation agreement or divorce that you did	not
_	aim subject to offset?	report as priority clai	ms or profit-sharing plans, and other similar debts	
■ No		•		
☐ Yes		Other. Specify	medical	

Entered 07/12/16 15:58:56 Case 16-81667 Doc 1 Filed 07/12/16 Desc Main

Document Page 21 of 53 Debtor 1 Kimberly L Carroll Case number (if know) 4.2 Care Credit Last 4 digits of account number \$1.412.00 Nonpriority Creditor's Name PO Box 960061 When was the debt incurred? Orlando, FL 32896 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.3 **Carlson Orthopedics** \$1,046.00 Last 4 digits of account number Nonpriority Creditor's Name P.O> Box 4519 When was the debt incurred? Rockford, IL 61105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes services Other. Specify 4.4 **Carmel Financial** Last 4 digits of account number \$1,332.00 Nonpriority Creditor's Name PO Box 1127 When was the debt incurred? **Carmel, IN 46082** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify misc.

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Entered 07/12/16 15:58:56 Case 16-81667 Doc 1 Filed 07/12/16 Desc Main

Document Page 22 of 53 Debtor 1 Kimberly L Carroll Case number (if know) \$1.308.00 4.5 Citi Bank Last 4 digits of account number Nonpriority Creditor's Name 7322 Southwest Freeway Suiten When was the debt incurred? 1600 Houston, TX 77074 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify misc. 4.6 Conoco Last 4 digits of account number \$341.00 Nonpriority Creditor's Name PO Box 530942 When was the debt incurred? Atlanta, GA 30353 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify misc. ☐ Yes 4.7 **Credit First** Last 4 digits of account number \$1,183.00 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 81315 Cleveland, OH 44181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No

☐ Yes

■ Other. Specify credit card

Debts to pension or profit-sharing plans, and other similar debts

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 23 of 53

Debtor 1 Kimberly L Carroll Case number (if know) 4.8 Credit One Last 4 digits of account number \$1.514.00 Nonpriority Creditor's Name PO Box 60578 When was the debt incurred? Los Angeles, CA 90060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify misc. 4.9 \$1,183.00 **Firestone** Last 4 digits of account number Nonpriority Creditor's Name PO Box 81344 When was the debt incurred? Cleveland, OH 44188 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify misc. 4.1 **Home Depo** \$1,333.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 78011 When was the debt incurred? Phoenix, AZ 85062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Entered 07/12/16 15:58:56 Case 16-81667 Doc 1 Filed 07/12/16 Desc Main

Document Page 24 of 53 Debtor 1 Kimberly L Carroll Case number (if know) 4.1 **OSF Healthcare** Unknown Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 1806 Peoria, IL 61656 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical ☐ Yes 4.1 **Per Mar Security** \$42.38 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 1101 When was the debt incurred? Davenport, IA 52805 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Rockford Anesthesia** \$814.00 Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 4569 When was the debt incurred? Rockford, IL 61110 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

debt

■ No ☐ Yes ☐ Student loans

report as priority claims

Other. Specify medical

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 25 of 53 Debtor 1 Kimberly L Carroll Case number (if know) 4.1 **Rockford Heath Systems** Unknown Last 4 digits of account number 4 Nonpriority Creditor's Name When was the debt incurred? 2400 N Rockton Avenue. Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical ☐ Yes 4.1 **Rockford Merchantile** \$1,130.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 2502 S. Alpine Rd. When was the debt incurred? Rockford, IL 61108 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collection ☐ Yes 4.1 **Rockford Pathologist** Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. BOx 4510 When was the debt incurred? Rockford, IL 61105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify

 \square Debts to pension or profit-sharing plans, and other similar debts

Document Page 26 of 53 Debtor 1 Kimberly L Carroll Case number (if know) 4.1 Rockford Radiology \$20.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 1973 Rockford, IL 61110 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical ☐ Yes 4.1 Shell \$1,308.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 9001011 When was the debt incurred? Louisville, KY 40290 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify misc. 4.1 **Synchrony Bank** \$750.00 Last 4 digits of account number 9 Nonpriority Creditor's Name P.O. Box 960061 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify misc.

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 27 of 53

Deb	tor 1 Kimberly L Carroll	Case number (if know)	
4.2 0	U.S. Bank	Last 4 digits of account number	\$1,001.00
<u> </u>	Nonpriority Creditor's Name PO Box 790408	When was the debt incurred?	
	Saint Louis, MO 63179-0408 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only		
		☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify misc.	
4.2	1		
1	Walmart	Last 4 digits of account number	\$1,010.00
	Nonpriority Creditor's Name PO Box 530927 Atlanta, GA 30353	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify misc.	
4.2	Walla Farra Barria		* 2.242.22
2	Wells Fargo Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$3,843.00
	7000 Vista Drive 4th Floor West Des Moines, IA 50266	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify misc.	
		- Oner, openiv ········	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Case 16-81667 Doc 1 Page 28 of 53 Case number (if know) Document

Debtor 1 Kimberly L Carroll

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 20,844.38
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 20,844.38

			111 1 11111 23 01 30	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kimberly L Carro	II		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	,		3. 3		

		Docume	ent Page 30 d	of 53	
Fill in this	s information to identify you	ur case:			
Dobtor 1	Minch only 1 Oct	II			
Debtor 1	Kimberly L Car	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
		NODTHEDN DIOTRICT	05 11 1 1010		
United Sta	ates Bankruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS		
Case num	nher				
(if known)					☐ Check if this is an
					amended filing
					-
Officia	al Form 106H				
Schoo	dule H: Your Co	dohtore			40/45
Scrie	dule H. Toul Co	dentors			12/15
our name	and number the entries in the and case number (if known) you have any codebtors?	n). Answer every question			p of any Additional Pages, write
	, ,	()	· · · · · · · · · · · · · · · · · ·		
■ No □ Ye					
Arizo	na, California, Idaho, Louisian Go to line 3. S. Did your spouse, former spouse	na, Nevada, New Mexico, Pu pouse, or legal equivalent live	e with you at the time? spouse as a codebto	nington, and Wisconsin.)	ty states and territories include g with you. List the person shown he creditor on Schedule D (Official
Form					Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The cro	editor to whom you owe the debt
	Name, Number, Street, City, State and	d ZIP Code		Check all schedule	
				_	
3.1				Schedule D, lin	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lir	ne
	Number Street			_	
	City	State	ZIP Code		
	•				
3.2				Schedule D, lin	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			_	
	City	State	ZIP Code		

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 31 of 53

Fill	in this information to identify your	case:							
	btor 1 Kimberly L								
	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number 		-			Check if this is: An amende A supplement	d filing	g postpetition	chapter
\bigcirc	fficial Form 106l							ollowing date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
Be a sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you cha separate sheet to this form. The security of the secu	ssible. If two married peo u are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not inclu	spouse i de inforr	s livin nation	g with you, included about your spo	ude inforn ouse. If mo	nation about ore space is i	your needed,
1.	Fill in your employment		Debtor 1			Debtor 2	or non-fi	ling spouse	
	information. If you have more than one job.		■ Employed				Debtor 2 or non-filing spouse ☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed		
	employers.	Occupation	environmental tech						
	Include part-time, seasonal, or self-employed work.	Employer's name	Rockford Mercy Health Systems						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here? 15 year	's					
Pai	rt 2: Give Details About Mo	onthly Income							
	imate monthly income as of the ouse unless you are separated.	date you file this form. If	you have nothing to re	eport for	any lin	e, write \$0 in the	space. Inc	clude your nor	n-filing
	ou or your non-filing spouse have me space, attach a separate sheet to		ombine the information	n for all e	mploy	ers for that perso	n on the li	nes below. If y	ou need
					F	For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, saldeductions). If not paid monthly,			2.	\$_	2,537.86	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$_	2,537.86	\$	N/A	
							<u> </u>		

Official Form 106I Schedule I: Your Income page 1

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 32 of 53

Deb	tor 1	Kimberly L Carroll	-	(Case	number (<i>if k</i>	nown)					
						Debtor 1		non-f	Debtor filing s	pouse		
	Cop	by line 4 here	4.		\$_	2,53	7.86	\$		N/A	_	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	55	6.12	\$		N/A	_	
	5b.	Mandatory contributions for retirement plans	5b	Э.	\$		0.00	\$		N/A	_	
	5c.	Voluntary contributions for retirement plans	50		\$		5.14	\$		N/A	_	
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	\$		N/A	_	
	5e. 5f.	Insurance Domestic support obligations	5€ 5f		\$_ \$		3.43	\$ \$		N/A	_	
	5g.	Union dues	5 <u>0</u>		\$ _		0.00	\$		N/A N/A	_	
	5h.	Other deductions. Specify:	_	ง. า.+	\$_			+ \$		N/A	_	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$		4.69	\$		N/A	_	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,81		\$		N/A	_	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									_	
		monthly net income.	88		\$	(0.00	\$		N/A	_	
	8b.	Interest and dividends	8b	٥.	\$	(0.00	\$		N/A	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	Э.	\$	(0.00	\$		N/A	_	
	8d.	• • •	80	d.	\$	(0.00	\$		N/A	_	
	8e.	Social Security	86	Э.	\$	(0.00	\$		N/A	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.00	\$		N/A	_	
	8g.	Pension or retirement income	80		\$		0.00	\$		N/A	_	
	8h.	Other monthly income. Specify:	_ 8r	Դ.+	\$_	(0.00	+ \$		N/A	_	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.00	\$		N/	A	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,813.17	+ \$		N/A	= \$	1 21	3.17
10.		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		1,013.17	• • -		14/7	- Ψ -	1,01	3.17
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	dep					•	chedule 11.			0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	1,81	13.17
13.	Do	you expect an increase or decrease within the year after you file this form	?						ι	Combi month		ome
		No.										

Official Form 106I Schedule I: Your Income page 2

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 33 of 53

Fill	in this information to identify you	ır case:				
Deb	Kimberly L Ca	arroll		Che □	ck if this is: An amended filing	
	otor 2 ouse, if filing)				•	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	nown)					
O	fficial Form 106J					
S	chedule J: Your E	xpenses				12/1
info		possible. If two married people ar ded, attach another sheet to this of question.				
Par	t 1: Describe Your Househ Is this a joint case?	old				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in □ No	n a separate household? file Official Form 106J-2, Expenses	s for Separate House	<i>hold</i> of Deb	otor 2.	
2.	Do you have dependents?	■ No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the dependents names.					☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No
3.	Do your expenses include expenses of people other that yourself and your dependent					☐ Yes
Est		g Monthly Expenses ur bankruptcy filing date unless y ankruptcy is filed. If this is a supp				
the		on-cash government assistance i have included it on <i>Schedule I:</i> \			Your exp	enses
4.	The rental or home ownership payments and any rent for the	ip expenses for your residence. I ground or lot.	nclude first mortgage	4. 5	\$	542.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$	·	0.00
	4b. Property, homeowner's,4c. Home maintenance, rep	or renter's insurance pair, and upkeep expenses		4b. \$ 4c. \$		0.00 50.00
_	4d. Homeowner's association	on or condominium dues		4d. \$	\$	0.00
5 .	Additional mortgage paymer	nts for vour residence , such as ho	me equity loans	5. 3	D .	0.00

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 34 of 53

Debtor	1	Kimberiy	L Carroll		Case no	umr	per (if known)	
6. Ut	iliti	ies:						
6. 6 1			heat, natural gas		6	a.	\$	200.00
6b		•	ver, garbage collection			b.		55.00
6c			, cell phone, Internet, satel	ite, and cable services		C.	•	100.00
6d		Other. Spe			_	d.	·	0.00
			ekeeping supplies			۵. 7.	\$	300.00
			hildren's education costs			7. 8.	\$	0.00
_			ry, and dry cleaning	•		9.		
		_				9. 0.		50.00
		•	roducts and services				·	50.00
			ntal expenses	have an inches forms	ı	1.	Ф	10.00
			Include gas, maintenance,	bus or train fare.	1	2.	\$	200.00
			ar payments.	pers, magazines, and books		3.		25.00
			_	-			·	
			ributions and religious do	onations	1	4.	Ф	0.00
5. In s			auranaa daduatad fram va	r nov or included in lines 4 or 20				
		ot include in Life insura		r pay or included in lines 4 or 20.	15	a.	\$	0.00
		Health ins			15			0.00
							·	0.00
_		Vehicle ins				C.	·	58.00
			rance. Specify:			d.	\$	0.00
			clude taxes deducted from	your pay or included in lines 4 or 2		_	•	
		ify:			1	6.	\$	0.00
			ease payments:				•	
			ents for Vehicle 1		17		·	132.00
			ents for Vehicle 2		17	b.	\$	0.00
17	c.	Other. Spe	ecify:		17	C.	\$	0.00
17	ď.	Other. Spe	ecify:		17	d.	\$	0.00
8. Y c	our	payments	of alimony, maintenance,	and support that you did not re	port as	_		
				ule I, Your Income (Official Forn	າ 106l).	8.	-	0.00
9. Ot	the	r payments	you make to support oth	ers who do not live with you.			\$	0.00
	eci	, <u> </u>				9.		
				d in lines 4 or 5 of this form or	on Schedule I:	Yο	ur Income.	
20	a.	Mortgages	on other property			a.	·	0.00
20	b.	Real estat	e taxes		20	b.	\$	0.00
20)c.	Property, I	nomeowner's, or renter's ins	surance	20	C.	\$	0.00
20	d.	Maintenan	ce, repair, and upkeep exp	enses	20	d.	\$	0.00
			er's association or condomi		20	e.	\$	0.00
_		r: Specify:					+\$	0.00
50		Opcony.				٠.	. Ψ	0.00
.2. C a	alcı	ulate your i	nonthly expenses					
22	a. /	Add lines 4	through 21.				\$	1,772.00
22	b. (Copy line 2:	2 (monthly expenses for De	btor 2), if any, from Official Form	106J-2		\$	-
			a and 22b. The result is you				\$	1,772.00
			and ZZD. The result is you	an monthly expenses.			Ψ	1,112.00
23. C a	alcu	ulate your i	monthly net income.					
23	Ba.	Copy line	12 (your combined monthly	income) from Schedule I.	23	a.	\$	1,813.17
			monthly expenses from line		23	b.	-\$	1,772.00
		.,,	• •			ſ		-,
23	Sc.	Subtract v	our monthly expenses from	your monthly income.				
			is your <i>monthly net income</i>		23	c.	\$	41.17
			,					
24. D o	o yo	ou expect a	in increase or decrease ir	your expenses within the year	after you file th	nis	form?	
				ur car loan within the year or do you ex	pect your mortgag	je p	payment to inc	rease or decrease because of a
			terms of your mortgage?					
	No	٥.						
П	ΙΥe	25	Explain here:					

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 35 of 53

Fill in this info	rmation to identify your	case:			
Debtor 1	Kimberly L Carro				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					neck if this is an nended filing
Official For Declara	-	ın Individual	Debtor's Sc	hedules	12/15
obtaining mone years, or both.		n connection with a banl		Making a false statement, conce n fines up to \$250,000, or impriso	
Did you p	ay or agree to pay some	one who is NOT an attor	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Declaration, and Signature	
•	alty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	l with this declaration and	
X /s/ Kir	mberly L Carroll		X		
Kimb	erly L Carroll ure of Debtor 1		Signature of D	Debtor 2	
Date	July 12, 2016		Date		

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 36 of 53

Fill in this informati	on to identify you	case:			
	Kimberly L Carro				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankru		NORTHERN DISTRICT (
_	proy Court for the.	- TORTHER PROPERTY OF CO.	or illustrate		
Case number (if known)					heck if this is an mended filing
Official Form	n 107				
		Affairs for Individ	duals Filing for B	ankruptcy	4/10
information. If more number (if known).	space is needed, Answer every ques	attach a separate sheet to stion.	this form. On the top of an	equally responsible for suppy additional pages, write you	
		rital Status and Where You	Lived Before		
1. What is your cu	rrent marital statu	S?			
☐ Married					
■ Not married	ı				
2. During the last	3 years, have you	lived anywhere other than	where you live now?		
■ No □ Yes. List all	of the places you li	ived in the last 3 years. Do no	ot include where you live now	٧.	
Debtor 1 Prior	Address:	Dates Debtor 1	Debtor 2 Prior Ac	ddress:	Dates Debtor 2
				nity property state or territory ico, Texas, Washington and W	
■ No	, , , , , , , , , , , , , , , , , , , ,	,,,		,	,
☐ Yes. Make	sure you fill out Sch	nedule H: Your Codebtors (Of	fficial Form 106H).		
Part 2 Explain th	ne Sources of You	r Income			
Fill in the total ar If you are filing a	mount of income you	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		dar years?
□ No ■ Yes. Fill in t	the details				
– 163.1111111	ine details.				
		Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of o		☐ Wages, commissions, bonuses, tips	\$3,382.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
For last calendar ye (January 1 to Decer		☐ Wages, commissions, bonuses, tips	\$28,002.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Aff	airs for Individuals Filing for B	- Sankruptcy	page '

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main

Document Page 37 of 53 Case number (if known) Kimberly L Carroll Debtor 1 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$31,100.00 ☐ Wages, commissions, □ Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for

No

Yes. List all payments to an insider.

Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid

Entered 07/12/16 15:58:56 Desc Main Doc 1 Filed 07/12/16 Case 16-81667

Page 38 of 53
Case number (if known) Document Debtor 1 Kimberly L Carroll

8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.					
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe	Include cred	ditor's name
Pai	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		rty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below.	Describe the Drawerty		Date		Value of the
	Creditor Name and Address	Describe the Property				Value of the property
		Explain what happened				
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
				taker		
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		rty in the possess	ion of an assigne	e for the ben	efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gifts	s with a total value	of more than \$60	00 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave jifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift or cor		or contributions v	with a total value	of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you	contributed		s you ributed	Value
Pai	t 6: List Certain Losses					
النا						

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Page 39 of 53 Document Case number (if known) Debtor 1 Kimberly L Carroll or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$900.00 David H. Carter 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was

Address payments received or debts property transferred paid in exchange Person's relationship to you

made

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Yes. Fill in the details.

Name of trust Description and value of the property transferred **Date Transfer was** made

Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Case 16-81667 Page 40 of 53
Case number (if known) Document

Debtor 1 Kimberly L Carroll

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

		,	•	•	Ū		
20.	sold, mo include houses,	year before you filed for bankrupto oved, or transferred? checking, savings, money market, pension funds, cooperatives, asso	or other financial accour	nts; certificates	of deposit		·
	L res	s. Fill in the details.					
		of Financial Institution and Signature (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of accou instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	•	now have, or did you have within 1 other valuables?	year before you filed for	bankruptcy, an	y safe dep	osit box or other deposi	tory for securities,
	■ No	s. Fill in the details.					
		of Financial Institution S (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	the contents	Do you still have it?
22.	Have yo	u stored property in a storage unit	or place other than your	home within 1 y	year befor	e you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.						
		of Storage Facility S (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	the contents	Do you still have it?
Par	t 9: Id	entify Property You Hold or Contro	I for Someone Else				
23.	Do you for som	hold or control any property that so eone.	omeone else owns? Inclu	ıde any propert	y you borr	owed from, are storing fo	or, or hold in trust
	■ No	s. Fill in the details.					
		s Name S (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	the property	Value
Par	t 10: G	ive Details About Environmental Inf	ormation				
For	the purp	ose of Part 10, the following definit	ions apply:				
	toxic su	mental law means any federal, state bstances, wastes, or material into to ons controlling the cleanup of thes	the air, land, soil, surface	water, ground	• .	•	
		ans any location, facility, or propert operate, or utilize it, including disp		environmental la	aw, wheth	er you now own, operate	, or utilize it or used
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					substance,	
Rep	ort all no	tices, releases, and proceedings th	at you know about, rega	rdless of when	they occu	rred.	
24.	Has any	governmental unit notified you that	t you may be liable or po	otentially liable (under or in	n violation of an environr	nental law?
	■ No	s. Fill in the details.					
	Name of Address	of site S (Number, Street, City, State and ZIP Code)	Governmental uni Address (Number, S ZIP Code)		Enviro	onmental law, if you it	Date of notice

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 41 of 53 Case number (if known) Debtor 1 Kimberly L Carroll 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Environmental law, if you Name of site Governmental unit Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection 18 U.S.C. §§ 152, 1341, 1519, and 3571.

with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

/s/ Ki	mberly L Carroll	
Kimb	erly L Carroll	Signature of Debtor 2
Signa	ture of Debtor 1	
Date	July 12, 2016	Date
Did yo	u attach additional p	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes	:	
Did yo	u pay or agree to pa	y someone who is not an attorney to help you fill out bankruptcy forms?
■ No		
☐ Yes	. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

page 6

Official Form 107

Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Case 16-81667 Page 42 of 53
Case number (if known) Document

Debtor 1 Kimberly L Carroll

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 43 of 53

		Docume	ent Page 43 of 53		
Fill in this infor	mation to identify your	case:			
Debtor 1	Kimberly L Carro				
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the:	NORTHERN DISTRICT			
Case number (if known)					☐ Check if this is an amended filing
Official Fo		n for Individu	ıals Filing Unde	r Chapte	er 7 12/15
•	lividual filing under cha	pter 7, you must fill out t ur property, or	his form if:		
You must file th	is form with the court w ever is earlier, unless th		ile your bankruptcy petition o		et for the meeting of creditors, e creditors and lessors you list
	eople are filing togethe	r in a joint case, both are	equally responsible for supp	olying correct in	nformation. Both debtors must
•	and accurate as possib our name and case nur	•	led, attach a separate sheet to	o this form. On	the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims			

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Chase Mortgage name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: 2503 Clifton Ave. Rockford, IL 61102 Winnebago County	■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ Yes
Creditor's Rock Valley Credit Union name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: 2006 chevy cobalt unknown miles	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 44 of 53

Debtor 1 Kimberly L Carroll	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
	Li Tes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intenti property that is subject to an unexpired lease.	on about any property of my estate that secures a debt and any personal
X /s/ Kimberly L Carroll	x
Kimberly L Carroll Signature of Debtor 1	Signature of Debtor 2
Date	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81667 Doc 1 Filed 07/12/16 Entered 07/12/16 15:58:56 Desc Main Document Page 49 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	re Kimberly L Carroll		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE O	F COMPENSATION OF ATTOR	NEY FOR DE	EBTOR(S)	
1.	compensation paid to me within one year	Bankr. P. 2016(b), I certify that I am the attorney before the filing of the petition in bankruptcy, o contemplation of or in connection with the bankr	r agreed to be paid	to me, for services	
	For legal services, I have agreed to	accept	. \$	900.00	
	Prior to the filing of this statement I	have received	\$	900.00	
				0.00	
2.	The source of the compensation paid to r	ne was:			
	■ Debtor □ Other (specif	·y):			
3.	The source of compensation to be paid to	me is:			
	■ Debtor □ Other (specif	y):			
4.	■ I have not agreed to share the above-	disclosed compensation with any other person ur	nless they are mem	bers and associates	of my law firm.
		closed compensation with a person or persons wh a list of the names of the people sharing in the co			law firm. A
5.	In return for the above-disclosed fee, I ha	ave agreed to render legal service for all aspects	of the bankruptcy of	ease, including:	
	 b. Preparation and filing of any petition. c. Representation of the debtor at the med. d. [Other provisions as needed] Negotiations with secured reaffirmation agreements a 	ation, and rendering advice to the debtor in determ schedules, statement of affairs and plan which neeting of creditors and confirmation hearing, and creditors to reduce to market value; exent applications as needed; preparation and fliens on household goods.	nay be required; any adjourned hea nption planning;	rings thereof;	l filing of
6.	By agreement with the debtor(s), the abo Representation of the debt any other adversary process	ve-disclosed fee does not include the following s ors in any dischargeability actions, judici eding.	ervice: al lien avoidanc	es, relief from st	ay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete shankruptcy proceeding.	statement of any agreement or arrangement for p	ayment to me for r	epresentation of the	debtor(s) in
	July 12, 2016	/s/ David H. Carter			
_	Date	David H. Carter			
		Signature of Attorney David H. Carter			
		308 W. State St., St			
		Rockford, IL 61101 815/968-8900 Fax:			
		Name of law firm	010/300-342/		

United States Bankruptcy Court Northern District of Illinois

		Tot them District of Himois		
In re	Kimberly L Carroll		Case No.	
		Debtor(s)	Chapter	7
	VE	ERIFICATION OF CREDITOR MA	TRIX	
		Number of Co	reditors:	24
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of creditor	s is true and	correct to the best of my
Date:	July 12, 2016	/s/ Kimberly L Carroll Kimberly L Carroll Signature of Debtor		

Rockford Health Physicians DEPARTMENT 4701 Carol Stream, IL 60122

Care Credit PO Box 960061 Orlando, FL 32896

Carlson Orthopedics P.O> Box 4519 Rockford, IL 61105

Carmel Financial PO Box 1127 Carmel, IN 46082

Chase Mortgage P.O. Box 24696 Columbus, OH 43224

Citi Bank 7322 Southwest Freeway Suiten 1600 Houston, TX 77074

Conoco PO Box 530942 Atlanta, GA 30353

Credit First P.O. Box 81315 Cleveland, OH 44181

Credit One PO Box 60578 Los Angeles, CA 90060

Firestone PO Box 81344 Cleveland, OH 44188

Home Depo PO Box 78011 Phoenix, AZ 85062 OSF Healthcare PO Box 1806 Peoria, IL 61656

Per Mar Security P.O. Box 1101 Davenport, IA 52805

Rock Valley Credit Union 1201 Clifford Rockford, IL 61101

Rockford Anesthesia P.O. Box 4569 Rockford, IL 61110

Rockford Heath Systems 2400 N Rockton Avenue. Rockford, IL 61103

Rockford Merchantile 2502 S. Alpine Rd. Rockford, IL 61108

Rockford Pathologist P.O. BOx 4510 Rockford, IL 61105

Rockford Radiology P.O. Box 1973 Rockford, IL 61110

Shell PO Box 9001011 Louisville, KY 40290

Synchrony Bank P.O. Box 960061 Orlando, FL 32896

U.S. Bank PO Box 790408 Saint Louis, MO 63179-0408 Walmart PO Box 530927 Atlanta, GA 30353

Wells Fargo Bank 7000 Vista Drive 4th Floor West Des Moines, IA 50266